

Select the examination section(s) you are requesting.

Examinations	Sections Included	Trans	Fee	8
Written Examination – Part I	Section I – Theory Licensing Exam Section II – Virginia Rules, Regulations, and Statutes	1011	\$ 95.00	<input type="checkbox"/>
Practical Examinations – Part II	Section I – Audiograms Section II – Speech Testing Section III – Earmold Impressions Section IV – Hearing Modification and Repairs	1011	\$ 95.00	<input type="checkbox"/>
Written and Practical Examinations (Part I and Part II)	Sections I through IV as listed above	1011	\$ 110.00	<input type="checkbox"/>

APPLICATION FEES ARE NOT REFUNDABLE

A check or money order payable to the **TREASURER OF VIRGINIA**, or a completed credit card payment form (available at <http://www.dpor.virginia.gov/dporweb/creditcard.cfm>) must accompany your application package

- Mr. ☐
- Ms. ☐
1. **Name** _____
 Last First Middle Generation
2. **Social Security Number or Virginia DMV Control Number** Σ _____
 Σ State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a Social Security number or a control number issued by the Virginia Department of Motor Vehicles.
3. **Date of Birth** _____
4. **Maiden Name or Former Surname(s)** _____
5. **Street Address** (PO Box not accepted) _____

 City State ZIP Code
6. **Mailing Address** (PO Box accepted) _____

 City State ZIP Code
7. **E-mail Address** _____
8. **Contact Numbers** Primary Telephone _____ Ext. _____
 Alternate Telephone _____ Ext. _____
 Facsimile _____
9. **Requested examination date** _____ 10. **Date of your last examination** _____
11. **Signature** _____ **Date** _____

FOR OFFICE USE ONLY	ENTITY #	FILE #	APPLICATION #	RECEIPT #	RECEIPT DATE
	FEE	TRANS CODE 1011	LICENSE # 2101		ISSUE DATE